

Work Order ID 78301

Monday, October 01, 2012 11:51:18 AM

\*78301\*

Ship Thursday  
Page 1

Item ID: D350-615-041

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Ground Handling Wheel Modification

Stop

\*NS2\*

Start Date: 1/5/2012 Start Qty: 50.00

\*50\*

Cust Item ID:

Required Date: 3/23/2012 Req'd Qty: 50.00

\*50\*

Customer:

Reference:

Approvals: Process Plan: WIF

Date: 10-01

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D350-615-041

B

100

\*100\*

DC

Document Control

Memo 0.00

Photocopy bluefile and type labels with Eurocopter part# (2 GHW Kits per box)  
as per PPP D350-615-041 CHG003

DAS  
10-01  
17/10/05

110

\*110\*

Small Fab

Memo 0.00

Assemble D2282-041 with D2282-043 as per Dwg D350-615.\*\*\*Only engage  
one thread on three 5/16-18-015C bolts\*\*\*

SOX

JB  
12/10/04

120

\*120\*

QC

Quality Control

QC5- Inspect part completeness to step on W/O 0.00

Memo

SO  
12/10/04  
DAS  
10-01  
17/10/05

SO  
10-01  
17/10/05

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS																																						
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>																								
Part No. _____			Work Order Update <input type="checkbox"/>																																									
NCR No. _____																																												
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date	Verification			QC Inspector																													
Doc/Data																																												
Equip/Tooling																																												
Operator																																												
Material																																												
Setup																																												
Other																																												
Process																																												
Supplier																																												
Training																																												
Unapproved																																												
FAULT CATEGORY																																												
Landing Gear				General																																								
				Bending <input type="checkbox"/>	Centre Not Concentric to O/S <input type="checkbox"/>	Cracks <input type="checkbox"/>	Crushed/Crimped. <input type="checkbox"/>	Cuffs <input type="checkbox"/>	Heat Treat <input type="checkbox"/>	Inspection Strip in Tube <input type="checkbox"/>	Ripples in Bend <input type="checkbox"/>	Torque Waves in Extrusion <input type="checkbox"/>	Turning Sequence <input type="checkbox"/>	Wave/Twist in Tube <input type="checkbox"/>	Bend <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Burrs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Countersink <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Drawing <input type="checkbox"/>	Finish <input type="checkbox"/>	Folio <input type="checkbox"/>	Grain <input type="checkbox"/>	Hardware <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Misread <input type="checkbox"/>	Offset <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	<input type="checkbox"/> Other

**Work Order ID 78301**

Monday, October 01, 2012 11:51:18 AM

**\*78301\***

Page 2

Item ID: D350-615-041

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Ground Handling Wheel Modification

Stop

**\*NS2\***

Start Date: 1/5/2012

Start Qty: 50.00

**\*50\***

Cust Item ID:

Required Date: 3/23/2012

Req'd Qty: 50.00

**\*50\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

**\*130\***

QC

Quality Control

QC4- 100% Inspect kits for completeness

0.00

DART  
16  
9-69 17110105

425  
sets-

140

**\*140\***

Packaging

Packaging

Memo

0.00

50x

10/10/2012

150

QC21- Final Inspection - Work Order Release

0.00

**\*150\***

QC

Quality Control

Memo

0.00

MJ 12-10-04

MF  
12-10-05

NCR: Yes / No

DQA: Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

## Picklist Print

Monday, October 01, 2012 11:51:18 AM

Page 1

**Work Order ID:** 78301

**Parent Item:** D350-615-041

**Parent Item Name:** Ground Handling Wheel Modification

**Start Date:** 1/5/2012

**Required Date:** 3/23/2012

**Comments:** IPP Rev:K Removed Manufacturing 05-12-05 JLM IPP Rev:L revise bom DD 10.03.18  
verified by:JLM

**Start Qty:** 50.00

Required Qty: 50.00

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____		DISPOSITION				AGAINST DEPARTMENT/PROCESS														
Part No. _____		Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification		QC Inspector								
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear				General																
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>												
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>																
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>																
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>																
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>																	
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>																	
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>																
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>																		
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>																		
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>																		
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>																		

# Picklist Print

Monday, October 01, 2012 11:51:18 AM

Page 2

Work Order ID: 78301

Parent Item: D350-615-041

Parent Item Name: Ground Handling Wheel Modification

Start Date: 1/5/2012

Required Date: 3/23/2012

Start Qty: 50.00

Required Qty: 50.00

5/16WC

Purchased

No

110

Each

1,634.0000

12

600

✓

SS Flat Washer 5/16 FW516S1

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

ST377	1614	
120262	1614	120262
ST522	20	
120208	20	

7/16-14-050C

Purchased

No

110

Each

239.0000

1

50

✓

SS Bolt 7/16 5" Long (92198A672)

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

ST379	39	
117359	8	
119301	31	31X119301
ST383	200	
120146	200	194120146

D3015-5

Manufactured

No

110

Each

196.0000

1

50

✓

SS Nylock Nut 7/16

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

ST023	196	
52744	2	
74906	194	74906

7/16WC

Purchased

No

110

Each

681.0000

2

100

✓

SS Flat Washer 7/16

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

ST378	181	
115129	181	115129
ST522	500	
120508	500	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

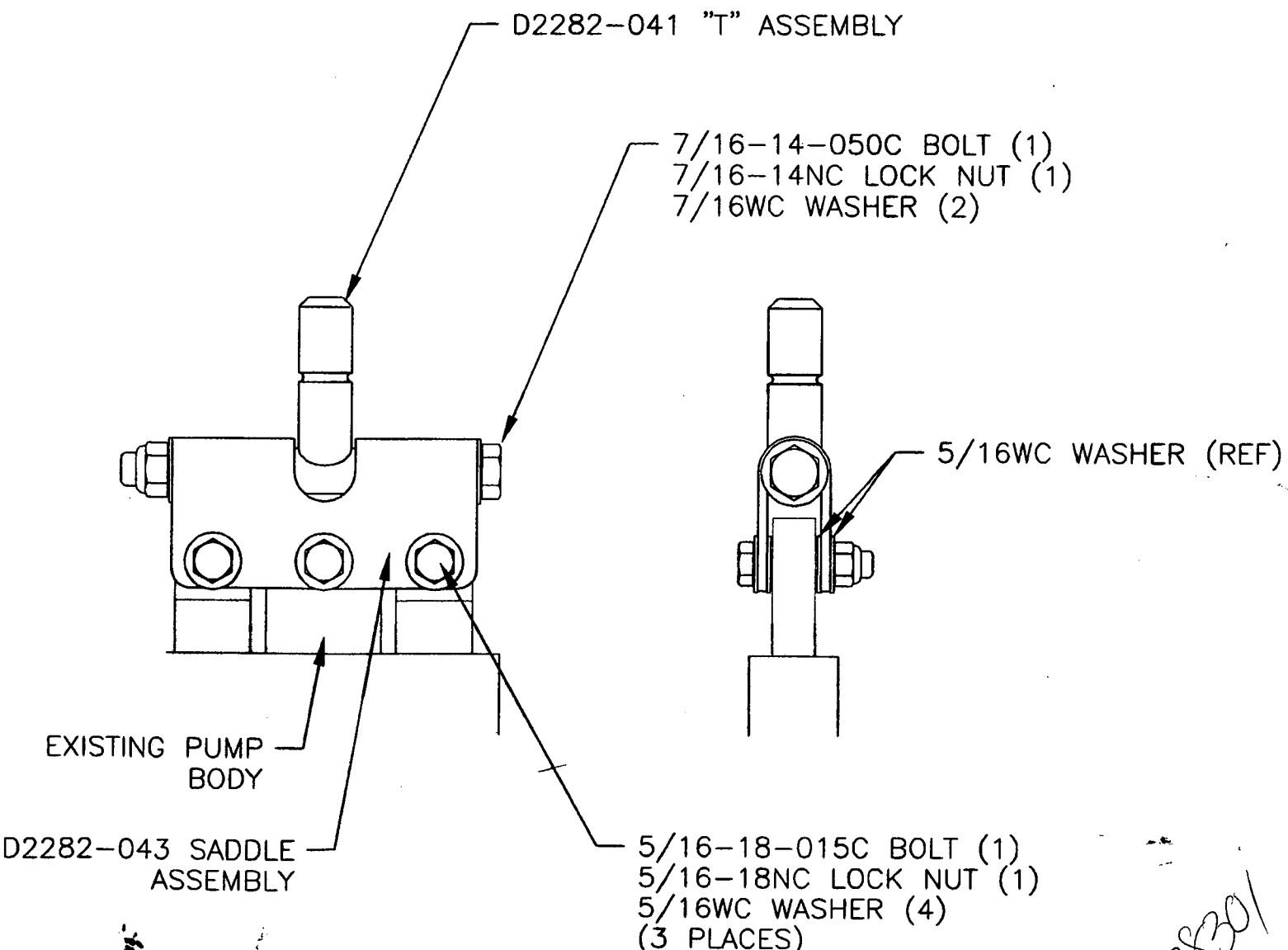
## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear			General								
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset		Other							
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

**DART**

DESIGN B-1	DRAWN BY KE	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA
CHECKED DMM	APPROVED B-1	DRAWING NO. D350-615
DATE 97.10.21	TITLE GND HLDNG WHEEL MOD.	REV. B SHEET 2 OF 2 SCALE NTS



NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS										
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other									
Part No. _____																
NCR No. _____																
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector							
Doc/Data																
Equip/Tooling																
Operator																
Material																
Setup																
Other																
Process																
Supplier																
Training																
Unapproved																
FAULT CATEGORY																
Landing Gear				General												
Bending	General			Bend	General			Grain	General			Ovalized	General			Pressure/Forced
Centre Not Concentric to O/S				BOM/Route				Hardware				Over/Under tolerance				Temperature/Cure
Cracks				Broken/Damaged				Inspection Incomplete				Part Incorrect				Weld
Crushed/Crimped.				Burrs				Instructions Incomplete/Unclear				Part Lost/Missing				Wrong Stock Pulled
Cuffs				Contamination				Maintenance				Part Moved				
Heat Treat				Countersink				Mislabeled				Positioned Wrong				
Inspection Strip in Tube				Cut Too Short				Misread				Power Loss/Surge				
Ripples in Bend				Drill Holes				Offset								
Torque Waves in Extrusion				Drawing				Out of Calibration								
Turning Sequence				Finish				Out of Sequence								
Wave/Twist in Tube				Folio				Outside Dimensions								

# **DART SERVICE INSTRUCTION**

APPLICABLE TO ALL DART AS350B3 PRODUCT

18/08/11  
AS350B3e

## **Purpose:**

To confirm applicability of Dart STC product to the AS350B3e

## **Discussion:**

Per EASA TCDS.R.008 Issue 5 dated June 17, 2011:

"The AS350B3 model a/c, which type design incorporates the following modifications:

- a) OP-4305 (Arriel2D engine installation), and additionally
- b) 07-5601 (Tail rotor control mechanism modification)
- c) 07-5600 (Tail rotor blade reinforcement)
- d) 07-8551 (Tail Gear Box control lever modification)

has a commercial designation <AS350B3e>"

## **Conclusion:**

The AS350B3e is a commercial designation of the AS350B3 and not a new aircraft type. The changes described above do not affect the existing Dart Aerospace Ltd. product line for the AS350B3. Therefore, all Dart Aerospace Ltd products which are approved on the AS350B3 are also approved on the AS350B3e.

A	NEW ISSUE			RF	11.08.03
REV.	DESCRIPTION			BY	DATE
DESIGN	DS	DRAWING NO. DSI 9568	REV. A SHEET 1 OF 1	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF				
CHECKED					
MFG. APPR.	N/A				
APPROVED		TITLE AS350B3e APPLICABILITY	SCALE NTS		
DE APPR.					
DATE	11.08.03	COPYRIGHT © 2011 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
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Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear			General								
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>							
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>							
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>									
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									